

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>PH</i>	<i>12192</i>	<i>4/10/00</i>
O.I.P.E. CLASSIFIER			<i>7-25-00</i>
FORMALITY REVIEW	<i>AF</i>	<i>70586</i>	<i>3-2-00</i>
RESPONSE FORMALITY REVIEW			

*5/16/00*

### INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)..... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final	Original	Date
1	✓	✓	✓
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17	✓	✓	✓
18	N		
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24	N		
25	✓	✓	✓
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29	✓	✓	✓
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
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Best Available Copy